

**Auburn University  
Graduate School**

**Leave of Absence Request Form**

**Date of Request:** \_\_\_\_\_ **Term(s) for which leave is requested:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Banner ID #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**College:** \_\_\_\_\_ **Department:** \_\_\_\_\_

**Degree Program:** \_\_\_\_\_

**Reason for Request (attach documentation):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

**Approvals**

\_\_\_\_\_  
*GPO or Department Head/Chair*

\_\_\_\_\_  
*Dean of the Graduate School*